

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

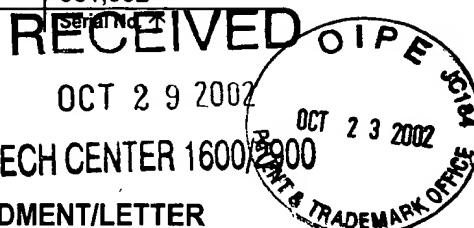
Oct 23 2002  
PATENT APPLICATION  
14Inventor(s): Bergmann et al.  
Appln. No.: 09

Series Code ↑ | Serial No. ↑ | 381,032

Filed: December 17, 1999

Hon. Commissioner of Patents  
Washington, D.C. 20231

Sir:

REPLY/AMENDMENT/LETTER

Group Art Unit 1644  
 Examiner: Huynh, P.N.  
 Atty. Dkt. P 0263260 | 2769 US AS  
 M# Client Ref  
 Appln. Title: Receptor Binding Assays for the  
 Detection of TSH Receptor  
 Autoantibodies and Reagent Kit for  
 Carrying Out Such a Receptor Binding  
 Assay  
 Date: October 23, 2002

This is a reply/amendment/letter in the above-identified application and includes the herewith attachment of same date and subject which is incorporated hereinto by reference and the signature below is treated as the signature to the attachment in absence of a signature thereto.

FEE REQUIREMENTS FOR CLAIMS AS AMENDED

1. Small Entity claim	For B & C See Required <b>Separate Paper</b> (Pat-256)
A. <input type="checkbox"/> NOT made	
B. <input type="checkbox"/> Withdrawn	
C. <input type="checkbox"/> made herewith	
D. <input checked="" type="checkbox"/> made previously	

	Claims remaining after amendment	Highest number previously paid for	Present Extra	Large/Small Entity	Additional Fee	Fee Code Lg/Sm
2. Total Effective Claims	17	**minus 20	0	x \$18/\$9 =	+ \$0	103/203
3. Independent Claims	2	***minus 3	0	x \$84/\$42 =	+ \$0	102/202
4. If amendment enters proper multiple dependent claim(s) into this application for first time (leave blank if this is a reissue application) .....		add	+ \$280/\$140 =	+ \$0		104/204
5. Original due Date: August 14, 2002	<input type="checkbox"/> NONE					
6. Petition is hereby made to extend the original due date to cover the date this response is filed for which the requisite fee is attached	(1 mo) (2 mos) (3 mos) (4 mos) (5 mos)	\$110/\$55 = \$400/\$200 = \$920/\$460 = \$1,440/\$720 = \$1,960/\$980 =	+ \$460			115/215 116/216 117/217 118/218 128/228
7. Enter any previous extension fee paid since above original due date and subtract			- \$0			
8.			Extension Fee	+ \$460		
9. If Terminal Disclaimer attached, add Rule 20(d) official fee .....			+ \$110/\$55	+ \$0		148/248
10. If IDS attached requires Official Fee under Rule 97 (c), ..... or if Rule 97(d) Request .....	add add	+ \$180 + \$180	+ \$0			126 126
11. After-Final Request Fee per rules 129(a) and 17(r) .....			+ \$740/370	+ \$0		146/246
12. No. of additional inventions for examination per Rule 129(b).....			x \$740/370 ea	+ \$0		149/249
13. Request for Continued Examination (RCE) .....			+ \$740/370	+ \$370		1179/1279
14. Petition fee for .....			+ \$0			
15.			TOTAL FEE =	\$830		
16. *If the entry in this space is less than entry in next space, the "Present Extra" result is "0".						
17. **If the "Highest number previously paid for" in this space is less than 20, write "20" in this space.						
18. ***If the "Highest number previously paid for" in this space is less than 3, write "3" in this space.						

Our Deposit Account No. 03-3975)

(Our Order No. 011377 0263260

C# M#

10/25/2002 AOSMAN1 00000100 033975 09381032

02 FC-2253 460.00 CH

**CHARGE STATEMENT:** The Commissioner is hereby authorized to charge any fee specifically authorized hereafter, or any missing or insufficient fee(s) filed, or asserted to be filed, or which should have been filed herewith or concerning any paper filed hereafter, and which may be required under Rules 16-18 (missing or insufficiencies only) now or hereafter relative to this application and the resulting Official Document under Rule 20, or credit any overpayment, to our Accounting/Order Nos. shown above, for which purpose a duplicate copy of this sheet is attached.

This CHARGE STATEMENT does not authorize charge of the issue fee until/unless an issue fee transmittal sheet is filed.

Query: Is appeal deadline now? If so, file Notice of Appeals separately.

Pillsbury Winthrop LLP  
Intellectual Property Group

By Atty: Robert W. Hahl

Sig:

Reg. No. 33893

Fax: (703) 905-2500  
Tel: (703) 905-2251

Atty/Sec: RWH/GXP

NOTE: File this cover sheet in duplicate with PTO receipt (PAT-103A) and attachments